## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CHEN 3561/EM

| CLAIMS AS FILED - PART I<br>(Column 1)                   |   |   |                 |                              | (Column 2)                      |   |     | SMALL ENTITY TYPE   |                        | OR | OTHER THAN OR SMALL ENTITY |                        |  |  |  |  |  |
|--|---|---|-----------------|------------------------------|---------------------------------|---|-----|---------------------|------------------------|----|----------------------------|------------------------|--|--|--|--|--|
| TOTAL CLAIMS   |   |   | 9               |                              |                                 |   | Γ   | RATE                | FEE                    |    | RATE                       | FEE                    |  |  |  |  |  |
| FOR  |   |   | NUMBER FILED    |                              | NUMBER EXTRA                    |   |     | BASIC FEE           | 375.00                 | OR | BASIC FEE                  | 750.00                 |  |  |  |  |  |
| TOTAL CHARGEABLE CLAIMS                                  |   |   | 9 minus 20=     |                              | *                               |   |     | X\$ 9=              |                        | OR | X\$18=                     |                        |  |  |  |  |  |
| INDEPENDENT CLAIMS                                       |   |   | / minus 3 =     |                              | *                               |   | Ì   | X42=                |                        | OR | X84=                       |                        |  |  |  |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                         |   |   |                 |                              |                                 |   |     | +140=               |                        | OR | +280=                      |                        |  |  |  |  |  |
| * If the difference in column 1 is less than zero, enter |   |   |                 |                              | r "0" in c                      | olumn 2   | L   | TOTAL               |                        | OR | TOTAL                      | 250                    |  |  |  |  |  |
| CLAIMS AS AMENDED - PART (Column 1) (Column              |   |   |                 |                              |                                 | (Column 3)  |     | SMALL E             | NTITY                  | OR | OTHER<br>SMALL             |                        |  |  |  |  |  |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                 | HIGH<br>NUM<br>PREVI<br>PAID | IEST<br>IBER<br>OUSLY           | PRESENT<br>EXTRA  |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |
|  | Total   | *   | Minus           | **                           |                                 | =   |     | X\$ 9=              |                        | OR | X\$18=                     |                        |  |  |  |  |  |
|  | Independent   | *   | Minus           | ***                          |                                 | =   |     | X42=                |                        | OR | X84=                       |                        |  |  |  |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA             |   |   |                 |                              |                                 |   |     | +140=               |                        | OR | +280=                      |                        |  |  |  |  |  |
|  |   |   |                 |                              |                                 |   |     | TOTAL               |                        | OR | TOTAL<br>ADDIT. FEE        |                        |  |  |  |  |  |
|  |   |   | ADDIT. FEE      |                              |                                 | ADDII. 1 EE   |     |                     |                        |    |                            |                        |  |  |  |  |  |
| AMENDMENT B  |   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                 | HIGI<br>NUN<br>PREV          | MN 2) HEST MBER HOUSLY FOR      | PRESENT<br>EXTRA  |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |
|  | Total   | *   | Minus           | **                           |                                 | =   |     | X\$ 9=              |                        | OR | X\$18=                     |                        |  |  |  |  |  |
|  | Independent   | *   | Minus           | ***                          |                                 | =   |     | X42=                |                        | OR | X84=                       |                        |  |  |  |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDEN .   |   |                 |                              | I CLAIM                         |   | ן נ | +140=               |                        | OR | +280=                      |                        |  |  |  |  |  |
|  |   |   |                 |                              |                                 |   |     | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE        |                        |  |  |  |  |  |
|  | (Column 1) (Column 2) (Column   |   |                 |                              |                                 |   |     |                     |                        | _  |                            |                        |  |  |  |  |  |
| ENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                 | NUI<br>PREV                  | HEST<br>MBER<br>HOUSLY<br>D FOR | PRESENT<br>EXTRA  |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |
| N N  | Total   | *   | Minus           | **                           |                                 | =   |     | X\$ 9=              |                        | OR | X\$18=                     |                        |  |  |  |  |  |
| AMENDMENT  | Independent   | *   | Minus           | ***                          | IT CLAIR                        | =   |     | X42=                |                        | OR | X84=                       |                        |  |  |  |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDEN   |   |                 |                              |                                 | "   | L   | +140=               |                        | OR | +280=                      |                        |  |  |  |  |  |
| *  | <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> </ul> |   |                 |                              |                                 |   |     |                     |                        | OR | TOTA                       | L                      |  |  |  |  |  |
| *  | **If the "Highest N   | umber Previously                            | Paid For" IN Th | IIS SPACE                    | ≣ is less th                    | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |     |                     |                        |    |                            |                        |  |  |  |  |  |